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## POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS INDICATION FORM**

Application Number	10/782,271				
Filing Date	2/18/2004				
First Named Inventor	Borzu Sohrab				
Title	Minimally invasive methods of monit				
Art Unit	3735				
Examiner Name	Berhanu, Etsub D				
Attorney Docket Number	LSI0086/US/3 (formerly LIFE-017CON2				

Thereby revoke all previous powers of attorney given in the above-identified application.   Thereby appoint:   Practitioners associated with the Customer Number:   OR									
Practitioners associated with the Customer Number:  OR  ✓ Practitioner(s) named below:  Name  Registration Number  SEE ATTACHED LIST OF PRACTITIONERS  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please recognize or change the correspondence address for the above-identified application to:  The address associated with the above-mentioned Customer Number:  OR  ✓ The address associated with Customer Number:  33072  OR  Firm or  Individual Name  Address  City  Country  Telephone  Imm the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature  Name  Mayumi Maeda  Telephone 408-956-4790  Title and Company  Assistant Secretary - LifeScan, inc.  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	I hereby revo	ke all previo	us powers of attorney given	ven in th	e above-ide	ntified applica	ation.		
OR    ✓ Practitioner(s) named below:    Name	I hereby appo	I hereby appoint:							
Name Registration Number  SEE ATTACHED LIST OF PRACTITIONERS  as iny/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please recognize or change the correspondence address for the above-identified application to:  The address associated with the above-mentioned Customer Number:  OR  Individual Name  Address  City  Country  Telephone  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Name  Mayumi Maeda  Telephone 408-956-4790  Title and Company  Assistant Secretary - LifeScan, Inc.  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Practitioners associated with the Customer Number:								
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Trademark Office connected therewith.  Please recognize or change the correspondence address for the above-identified application to:  The address associated with the above-mentioned Customer Number:  OR  The address associated with Customer Number:  33072  The address associated with Customer Number:  I am the:  Applicant/Inventor.  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature  Name  Mayumi Maeda  Telephone  Apsistant Secretary - LifeScan, Inc.  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	3527					<del></del>			$\neg$
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The address associated with the above-mentioned Customer Number:  OR  The address associated with Customer Number:  OR  Firm or Individual Name  Address  City State Zip  Country  Telephone Email  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature  Mayumi Maeda  Title and Company Assistant Secretary - LifeScan, Inc.  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.									
The address associated with Customer Number:    State   Zip	Please recogniz	e or change the	correspondence address for t	he above-	identified applic	cation to:			
The address associated with Customer Number:  OR  Firm or Individual Name  Address  City State Zip  Country  Telephone Email  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature  Name Mayumi Maeda Telephone 408-956-4790  Title and Company Assistant Secretary - LifeScan, Inc.  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		dress associate	ed with the above-mentioned C	ustomer N	lumber:		7		
The address associated with Customer Number:  OR  Firm or Individual Name  Address  City State Zip  Country  Telephone Email  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)  SIGNATURE of Applicant or Assignee of Record  Signature  Name Mayumi Maeda Telephone 408-956-4790  Title and Company Assistant Secretary - LifeScan, Inc.  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	l								
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Name	Mayumi	Mayumi Maeda				Telephone	408-956-4790	
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[7]	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
	*Total of 1 forms are submitted.								

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Attachment to Power of Attorney

and

Correspondence Address Indication Form

## **Practitioners**

Name	Registration Number	
Michaele A. Hakamaki	40,011	
Kevin J. Hubbard	50,717	
Kimberly S. Jordahl	40,998	
James V. Lilly	27,817	
Scott R. Pribnow	43,869	
Bernard E. Shay	32,061	
Mayumi M. Maeda	40,075	
Paul Coletti	32,019	
Mark Warfield	33,463	

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at of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. STATEMENT UNDER 37 CFR 3.73(b) Applicant/Patent Owner: LifeScan. Inc. Application No./Patent No./Control No.: 10/782.271 Filed/Issue Date: 2/18/2004 Entitled: MINIMALLY INVASIVE METHODS OF MONITORING ANALYTE CONCENTRATION LifeScan, Inc. , a corporation (Name of Assignee) (Type of Assignee: corporation, partnership, university, government agency, etc.) states that it is: 1. the assignee of the entire right, title, and interest; or an assignee of less than the entire right, title and interest (The extent (by percentage) of its ownership interest is \_ %) in the patent application/patent identified above by virtue of either: A. ✓ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 011852 , Frame 0480 , or a true copy of the original assignment is attached. OR B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows: The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_ \_\_\_, or for which a copy thereof is attached. To: The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_ , Frame \_, or for which a copy thereof is attached. 3. From: To: The document was recorded in the United States Patent and Trademark Office at \_\_\_\_\_, Frame \_\_\_\_\_\_, or for which a copy thereof is attached. Additional documents in the chain of title are listed on a supplemental sheet. As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11. [NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08] The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. Mayumi Maeda 408-956-4790 Printed or Typed Name Telephone Number Assistant Secretary

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Title